By: Cortez, Guillen, Fierro H.B. No. 1782

A BILL TO BE ENTITLED

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1	AN ACT
2	relating to a plan to increase the use of telemedicine medical
3	services, telehealth services, and interprofessional Internet
4	consultations in this state.
5	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
6	SECTION 1. Subchapter B, Chapter 531, Government Code, is
7	amended by adding Section 531.021611 to read as follows:
8	Sec. 531.021611. ACTION PLAN TO EXPAND TELEMEDICINE MEDICAL
9	SERVICES AND TELEHEALTH SERVICES. (a) The commission shall
10	develop and implement an action plan to:
11	(1) expand the use of and increase access to
12	telemedicine medical services, telehealth services, and related
13	mobile applications for those services by health care providers for
14	the residents of this state; and
15	(2) increase the availability of critical medical care
16	and health care services to residents in this state in areas
17	determined by the commission to be medically underserved.
18	(b) In developing and implementing the action plan under
19	Subsection (a), the commission shall:
20	(1) evaluate, in collaboration with the Maternal

Mortality and Morbidity Task Force established under Chapter 34,

Health and Safety Code, and other interested persons, the use of

telemedicine medical services for women during pregnancy and the

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postpartum period;

1	(2) seek the assistance of the Texas Hospital
2	Association, the Texas Medical Association, the Texas Nurses
3	Association, The University of Texas System Virtual Health Network,
4	teaching hospitals, and the statewide health coordinating council;
5	and
6	(3) consult with health care providers, advocacy
7	groups, relevant federal agencies, and any other interested persons
8	the commission considers necessary to develop the action plan
9	required by this section.
10	(c) The action plan developed under Subsection (a) must
11	<pre>include:</pre>
12	(1) short-term and long-term plan recommendations,
13	including policy initiatives and reforms necessary to implement the
14	<pre>plan;</pre>
15	(2) statutory and administrative reforms necessary to
16	<pre>implement the plan; and</pre>
17	(3) options for the funding necessary to implement the
18	plan.
19	(d) The commission shall:
20	(1) not later than September 1, 2021:
21	(A) submit to the governor and the legislature
22	the recommendations, the statutory and administrative reforms, and
23	the funding options described in Subsection (c) and short-term and
24	long-term plans to implement those recommendations, reforms, and
25	options; and
26	(B) begin implementing the short-term plan;
27	(2) not later than September 1, 2023, fully implement

1	<pre>the short-term plan;</pre>
2	(3) not later than September 1, 2029, fully implement
3	the long-term plan; and
4	(4) include the short-term and long-term plans in the
5	update of the strategic plan for health and human services under
6	Section 531.022.
7	(e) This section expires September 1, 2030.
8	SECTION 2. Subchapter B, Chapter 531, Government Code, is
9	amended by adding Section 531.02166 to read as follows:
10	Sec. 531.02166. INTERPROFESSIONAL INTERNET CONSULTATIONS
11	PILOT PROGRAM. (a) Not later than September 1, 2021, and subject
12	to Subsection (e), the commission shall develop and implement a
13	pilot program through which the commission provides or contracts
14	with a third party to provide technical assistance to train
15	Medicaid providers regarding the use of interprofessional Internet
16	consultations for Medicaid recipients in rural and medically
17	underserved areas. The program must be designed to determine
18	whether the use of technology improves access to specialty care,
19	including pediatric, prenatal, postnatal, and behavioral health
20	services, for Medicaid recipients.
21	(b) The commission shall:
22	(1) implement the pilot program in:
23	(A) at least one:
24	(i) federally qualified health center;
25	(ii) municipal public health system;
26	(iii) clinic that is a member of a nonprofit
27	membership association that supports charitable clinics in this

1	state; and
2	(iv) rural community center; and
3	(B) a maximum of 20 health clinics; and
4	(2) ensure that a third party contracted to provide
5	technical assistance described under Subsection (a):
6	(A) has significant experience integrating
7	telehealth services, telemedicine medical services, and online
8	consultations with electronic health records; and
9	(B) has a current contract with the United States
10	Department of Health and Human Services Health Resources and
11	Services Administration as a regional telehealth resource center.
12	(c) The commission shall examine cost avoidance that
13	results from providing telemedicine medical services to Medicaid
14	recipients in rural and medically underserved communities through
15	the pilot program, including cost avoidance that results from:
16	(1) reducing recipient wait times for specialty care
17	providers;
18	(2) improving access to specialty care;
19	(3) reducing the number of recipient referrals; and
20	(4) reducing the number of miles traveled by
21	recipients for specialty care consultations.
22	(d) Not later than December 31, 2022, the commission shall
23	report to the legislature regarding the status and results of the
24	pilot program and make recommendations regarding whether to
25	continue, expand, or terminate the program.
26	(e) The commission is required to implement this section
27	only if the legislature appropriates money specifically for that

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- 1 purpose. If the legislature does not appropriate money
- 2 specifically for that purpose, the commission may, but is not
- 3 required to, implement this section using other appropriations
- 4 available for that purpose.
- 5 <u>(f) This section expires September 1, 2023.</u>
- 6 SECTION 3. This Act takes effect September 1, 2019.